

TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US), CONCERNING A FILING UNDER 35 U.S.C. 371		Attorney Docket No. 2503-1215 U.S. Application No. 10/7580190
INTERNATIONAL APPLN. NO. PCT/EP2004/012472	INTERNATIONAL FILING DATE November 11, 2004	PRIORITY DATE CLAIMED November 24, 2003
TITLE OF INVENTION: COMPOSITIONS FOR THE TREATMENT OF AFFECTIONS OF THE ORAL CAVITY AND UPPER RESPIRATORY TRACT		
APPLICANT(S) FOR DO/EO/US: Ezio BOMBARDELLI		
<p>Applicant herewith submits to the United States Designated Elected Office (DO/EO/US) the following items and other information:</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371. <input checked="" type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below. <input checked="" type="checkbox"/> The US has been elected (Article 31). <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371 (c)(2)) <ol style="list-style-type: none"> <input checked="" type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau). <input type="checkbox"/> has been communicated by the International Bureau. See attached PCT/IB/308. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US). <input checked="" type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371 (c)(2)) <ol style="list-style-type: none"> <input type="checkbox"/> is attached hereto. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4). <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3)) <ol style="list-style-type: none"> <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). <input type="checkbox"/> have been communicated by the International Bureau. <input type="checkbox"/> have not been made, however, the time limit for making such amendments has NOT expired. <input type="checkbox"/> have not been made and will not be made. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371 (c)(3)). <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)) <input type="checkbox"/> A Declaration of Inventorship for purposes of U.S.A. designation pursuant to rule 4.17(iv).)) <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)). <p>Items 12 to 23 below concern document(s) or information included:</p> <ol style="list-style-type: none"> <input checked="" type="checkbox"/> Information Disclosure Statement (IDS) w/PTO-1449 - <input checked="" type="checkbox"/> Copy of IDS citations. - <input checked="" type="checkbox"/> PCT/ISA/210 International Search Report included <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)). <input checked="" type="checkbox"/> A preliminary amendment. <input checked="" type="checkbox"/> An Application Data Sheet under 37 C.F.R. 1.76. <input checked="" type="checkbox"/> Itemized Return Receipt Postcard <input checked="" type="checkbox"/> Abstract <input type="checkbox"/> A substitute specification. <input type="checkbox"/> Power of Attorney and Statement under 37 CFR §3.73(b) <ol style="list-style-type: none"> <input type="checkbox"/> Newly executed Power of Attorney <input type="checkbox"/> A change of Power of Attorney and/or change of address letter. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 - 1.825. <input type="checkbox"/> A second copy of the published international application under 35 U.S.C. 154(d)(4). <input type="checkbox"/> A second copy of the English language translation of the international application (35 U.S.C. 154(d)(4)). <input checked="" type="checkbox"/> Other items or information: <u>PCT/IB/306, PCT/IPEA/409</u> 		

Y & T May 23, 2006

U.S. APPLICATION NO. 10/580190	INTERNATIONAL APPLN. NO. PCT/EP2004/012472	ATTORNEY DOCKET NO. 2503-1215																																								
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input checked="" type="checkbox"/> The following fees are submitted:		CALCULATIONS PTO USE ONLY																																								
PCT FEES - NATIONAL STAGE																																										
<u>Fee Description</u>																																										
<table border="1"> <tr> <td colspan="2">Non ISA/US Search Provided</td> <td>Basic National Stage Fee</td> <td>\$300.00</td> </tr> <tr> <td colspan="2"></td> <td>National Stage Search Fee</td> <td>\$400.00</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> US was the IPEA And all claims satisfied the provisions of PCT Article 33 (1)-(4)</td> <td>National Stage Examination Fee</td> <td>\$200.00</td> </tr> <tr> <td colspan="2">Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20- <input checked="" type="checkbox"/> 30 months from the earliest claimed priority date (Fee Code 1617/2617)</td> <td></td> <td>\$0.00</td> </tr> <tr> <td colspan="2"> National Stage Application size fee each additional 50 sheets in excess of 100 Fee Code 1681/2681 </td> <td> Additional Sheets - 100 = <u>50</u> = <u> </u> X </td> <td> Fee From Below <u>\$125.00</u> \$0.00 </td> </tr> <tr> <td colspan="2"> CLAIMS Independent Claims Fee Codes 1614 / 2614 Total Claims Fee Codes 1615 / 2615 </td> <td> NUMBER FILED 2 - 3 = <u>0</u> </td> <td> NUMBER EXTRA 0 RATE x \$100.00 <u>\$0.00</u> </td> </tr> <tr> <td colspan="2"> MULTIPLE DEPENDENT CLAIM(S) (if applicable) Fee Code 1616 / 2616 Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).Fee Code 1618 </td> <td> 15 - 20 = <u>0</u> </td> <td> x \$25.00 <u>\$0.00</u> </td> </tr> <tr> <td colspan="2"> Fee for recording the enclosed assignment (37 CFR 1.21(h)). (Fee code 8021) <u>\$40.00 per property</u> </td> <td> + \$360.00 </td> <td> <u>\$0.00</u> </td> </tr> <tr> <td colspan="2"></td> <td> TOTAL FEES ENCLOSED = <u> </u> </td> <td> <u>\$40.00</u> <u>\$940.00</u> </td> </tr> <tr> <td colspan="2"></td> <td></td> <td> Amount to be refunded: Charged: </td> </tr> </table>			Non ISA/US Search Provided		Basic National Stage Fee	\$300.00			National Stage Search Fee	\$400.00	<input type="checkbox"/> US was the IPEA And all claims satisfied the provisions of PCT Article 33 (1)-(4)		National Stage Examination Fee	\$200.00	Surcharge of \$130.00 for furnishing the oath or declaration later than <input type="checkbox"/> 20- <input checked="" type="checkbox"/> 30 months from the earliest claimed priority date (Fee Code 1617/2617)			\$0.00	National Stage Application size fee each additional 50 sheets in excess of 100 Fee Code 1681/2681		Additional Sheets - 100 = <u>50</u> = <u> </u> X	Fee From Below <u>\$125.00</u> \$0.00	CLAIMS Independent Claims Fee Codes 1614 / 2614 Total Claims Fee Codes 1615 / 2615		NUMBER FILED 2 - 3 = <u>0</u>	NUMBER EXTRA 0 RATE x \$100.00 <u>\$0.00</u>	MULTIPLE DEPENDENT CLAIM(S) (if applicable) Fee Code 1616 / 2616 Processing fee of \$130.00 for furnishing the English translation later than <input type="checkbox"/> 20 <input type="checkbox"/> 30 months from the earliest claimed priority date (37 CFR 1.492(f)).Fee Code 1618		15 - 20 = <u>0</u>	x \$25.00 <u>\$0.00</u>	Fee for recording the enclosed assignment (37 CFR 1.21(h)). (Fee code 8021) <u>\$40.00 per property</u>		+ \$360.00	<u>\$0.00</u>			TOTAL FEES ENCLOSED = <u> </u>	<u>\$40.00</u> <u>\$940.00</u>				Amount to be refunded: Charged:
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<input checked="" type="checkbox"/> A check in the amount of \$ 940.00 to cover the above fees is attached. <input type="checkbox"/> The Director is hereby authorized to charge indicated fees and credit any overpayment to Deposit Account No. 25-0120 in the name of Young & Thompson. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 25-0120 for any additional fee required under 37 C.F.R. §§ 1.16 or 1.17.																																										
SEND ALL CORRESPONDENCE TO: YOUNG & THOMPSON 745 South 23 rd Street Arlington, VA 22202 Telephone: (703) 521-2297 Facsimile: (703) 685-0573																																										
 SIGNATURE Benoit Castel, Reg. No. 35,041 NAME, REGISTRATION NUMBER May 23, 2006 DATE																																										
Y&T Customer No. 00466 <u>BC/dw</u>																																										